## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P97000002168**

1. Entity Name

DENTAL TECHNOLOGIES, INC.



**FILED** May 02, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

614 N E 124 ST

N MIAMI, FL 33161 US

614 NE 124TH ST NORTH MIAMI, FL 33161



## DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 04232008

4. FEI Number	Applied For		
65-0720346	 Not Applicable		
5. Certificate of Status Desired	\$8.75 Additional		

6. Name and Address of Current Registered Agent

KELLEY, CHRISTOPHER 11098 BISCAYNE BLVD. SUITE 205

DO NOT WRITE IN THIS SPACE

MIAMI, FL 33161		11110017102				
	1			•		¥*
	named entity submits this statement for the plans of registered agent.	urpose of changing its registere	ed office or re	egistered agent, or bo	oth, in the State of Florida. I am far	niliar with, and accept
SIGNATURE			d Agent signature	nt signature reduired when reinstating) DATE		
	E NOW!!! FEE IS \$150.00 . ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000943181 05/29/08-80049-00	08 150.00
10.	OFFICERS AND DIREC	CTORS	,		<del>.</del> ,	10.00
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PST MARROCCO, RON 614 N.E. 124TH STREET NORTH MIAMI, FL 331615523					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	•
TITLE NAME STREET ADDRESS CITY-S1-ZIP	-			487		A Transcont
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR